

BEST AVAILABLE COPY**PATENT**
ATTORNEY DOCKET NO.: NG(MS)6619**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****RECEIVED**
CENTRAL FAX CENTER**DEC 20 2006**

Inventor(s): Henry Frank Gasbarro

Confirmation No.: 6064

Application No.: 10/634,535

Examiner: Brian J. Broadhead

Filing Date: 5 August 2004

Group Art Unit: 3661

Title: Personal Digital Assistant Having Satellite Communication Capacity

Mail Stop Amendment
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450**TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT**

Sir:

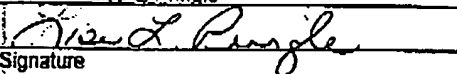
Transmitted herewith is/are the following in the above-identified application:

- ☒ Response/Amendment
☐ New fee as calculated below
☒ No additional fee
☐ Other: _____ (fee \$ _____)
- ☐ Request to extend time to respond
☐ Supplemental Declaration


CLAIMS AS AMENDED BY OTHER THAN A SMALL ENTITY						
(1)	(2)	(3)	(4)	(5)	(6)	(7)
FOR	CLAIMS REMAINING AFTER AMENDMENT	NUMBER EXTRA	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS		MINUS		0	\$50.00	\$0.00
INDEP. CLAIMS		MINUS		0	\$200.00	\$0.00
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					\$360.00	
EXTENSION FEE	1ST MONTH \$120.00 <input type="checkbox"/>	2ND MONTH \$450.00 <input type="checkbox"/>	3RD MONTH \$1,020.00 <input type="checkbox"/>	4TH MONTH \$1,590.00 <input type="checkbox"/>		
OTHER FEES						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$0.00

Charge \$ _____ to Deposit account 20-0090. At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 20-0090 pursuant to 36 CFR 1.25. Additionally, please charge any fees to Deposit Account 20-0090 under 37 CFR 1.16 through 1.21 inclusive, and any other sections in Title 37 of the Code of Federal Regulations that may regulate fees. A duplicate copy of this sheet is enclosed.

CERTIFICATE OF MAILING (37 C.F.R. 1.8a)
I hereby certify that this correspondence is being transmitted to the Patent and Trademark Office facsimile number (571) 273-8300 on 20 December 2006.
Number of Pages: 3

Lisa L. Pringle

Signature

Respectfully submitted,

By 
Christopher P. Harris
Attorney/Agent for Applicant(s)
Reg. No.: 43,660
Date: 20 December 2006
Telephone: (216)621-2234

NOT AVAILABLE COPYRECEIVED
CENTRAL FAX CENTER

DEC 20 2006

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. 1.8A)

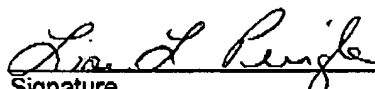
I hereby certify that this correspondence is, on the date shown below, being:

MAILING
deposited with the United States
Postal Service, with sufficient postage, as first
class mail in an envelope addressed to the
Commissioner for Patents, P.O. Box 1450,
Alexandria, VA 22313-1450

FACSIMILE
☒ transmitted by facsimile to the Patent and
Trademark Office @ (571)273-8300.

3 total number of pages including transmittal.

Date: 20 December 2006


Signature
Lisa L. Pringle
(type or print name of person certifying)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Henry Frank Gasbarro

Serial No.: 10/634,535

Filed: 5 August 2003

)
)
) Group Art Unit: 3661
)
) Confirmation No.: 6064
)
) Examiner: Brian J. Broadhead
)

For: *Personal Digital Assistant Having Satellite Communication Capacity***RESPONSE TO RESTRICTION REQUIREMENT DATED November 21, 2006**

Mali Stop - Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This paper is in response to an Office Action dated November 21, 2006, which included a
restriction requirement.

A substantive examination of the above-identified patent application is respectfully
requested in view of the following comments.

RECEIVED
CENTRAL FAX CENTER

Serial No. 10/634,535

DEC 20 2006

Docket No. NG(MS)6619

BEST AVAILABLE COPY

REMARKS

The Office Action has issued a restriction requirement and requested that applicant elect one of the following groups: Group I - directed to claims 1-6; Group II - directed to claims 8-12; Group III - directed to claims 13, 14 and 16; and Group IV - directed to claims 17 and 18.


Applicant provisionally elects claims Group I without traverse.

Therefore, Applicant requests reconsideration and withdrawal of the restriction requirement. Should the Examiner believe that a telephone interview would be helpful to expedite prosecution, the Examiner is invited to contact Applicant's undersigned attorney at the telephone number listed below.

Please charge any deficiency or credit any overpayment in the fees for this amendment to our Deposit Account No. 20-0090.

Respectfully submitted,

Date

12-20-06
Christopher P. Harris
Registration No. 43,660

CUSTOMER NO.: 26,294

TAROLI, SUNDHEIM, COVELL, & TUMMINO L.L.P.
1300 EAST NINTH STREET, SUITE 1700
CLEVELAND, OHIO 44114

Phone: (216) 621-2234

Fax: (216) 621-4072